

APPLICATION FOR ADMISSION TO THE BINATIONAL DOCTORAL PROGRAM IN BIOMEDICAL SCIENCES

Mr. Dean of the Faculty of

Pharmacy and Biochemistry

Professor Dr. Pablo Evelson.

Of my greatest consideration:

 I request Mr. Dean and, through him, the Doctoral Commission, for my admission as a candidate for the Binational Doctoral Program in Biomedical Sciences, joint program between Universidad de Buenos Aires and University of Freiburg.

Surname:

Name:

Date of birth: D.N.I. or Passport:

Nationality:

Country of habitual residence (Do not considerate the period of the Doctoral Program):

Address:

City: Postal Code:

Telephone: E-mail:

Undergraduate Degree:

University of graduation:

Institution where you will carry out the thesis work:

Name and surname of the candidate for thesis director:

Affiliation

Name and surname of the candidate for thesis co-director:

Affiliation

**You are a Doctoral Fellow: YES / NO (Cross out what does not apply)**

**If so, indicate the institution granting the doctoral scholarship:**

**Year of award of the doctoral scholarship:**

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 Place and date Signature and clarification